

0342.50.70

Discontinuing Extended MA - Notice Required

REV: ~~06/1998~~09/2006

When a family becomes ineligible for the Family Independence Program or Section 1931 MA for reasons related to employment, the family is advised in writing of their continuing eligibility for medical coverage. InRhodes generates a notice informing the family of the extended MA program's eligibility

~~requirements,~~requirements; the time-limited nature of the program (~~18-12~~12 months maximum), and the exact date coverage will end when the maximum period of benefits has passed. The notice also explains that family members may qualify for Medical Assistance under other provisions of the program when eligibility for extended MA ceases.

When extended MA is discontinued for any reason prior to the end of the maximum ~~eighteen-twelve-month~~twelve-month period, a separate notice of adverse action is sent.